Effective January 1, 2003 /0/693 796												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL	SMALL ENTITY OTHER T				
TOTAL CLAIMS			33				RAT	RATE			RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	Basic Fee	750.00
TOTAL CHARGEABLE CLAIMS			33 minus 20-		• 13		X\$	X\$ 9=		OR	X\$18=	138
INDEPÊNDENT CLAIMS			ブ minus 3 =		8		X42	X42=		OR	X84≈	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+14	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	TOT	AL		OR	TOTAL	984
CLAIMS AS AMENDED - PART II										J	OTHER	
2	-22 -07 (Côtumn 1) (Column 2) (Column 3)						SMA	LL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM! PREVIO PAID	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 35	Minus	 3	3	· 2	X\$:)::		OR	X\$+8=	100
AME	Independent	• 5	Minus		3	- 2	X42			OR	\$600 X84±	400
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)= 		OR	+280=	0
_	·				•		ADDIT.	TAL		OR	TOTAL	500
76-07 (Column 1) (Column 2) (Column 3)								FEE (10	ADDIT, FEE	0.10
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER SUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 32	Minus	· 35			X\$ ()=		OR	X\$18-	
	Independent FIRST PRESE	NTATION OF MI	Minus ULTIPLE DEF	ENDENT	CLAIM	<u> -</u>	X42	8		OR	X84=	•
										OR	+280¤	
. ()	120/00	ROS					ADDIT.	TAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)											7	
AMENDMENT C	· 	REMAINING AFTER AMENDMENT	i	HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	€	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
NO.	Total	· <i>3</i> 4	Minus	ر م م	35	-/	X3 5	,		ØR.	X\$18=	
AME	Independent	· 5	Minus	***	0	<u>/</u>	X42			OR	X84-/	'
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASM											
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 							+140	TAL		OR	+280=	
-	ii the "Highest Nu	imber Previously P imber Previously Pa inber Previously Pa	ald For IN THI	S SPACE I	a loce the	n 3 enter 3 *	70011.		propriate box	OR	ADDIT. FEE!	
FORI	PTO-675 (Res. 1)	202) 11.5.0	Sovernment Printing	Office: 2001	400.484/11	2013	Datast and	dan			ASTMENT OF	

Application or Docket Number